WARWICK 2011 DISTRICT 11 COUNCIL				5
Title		Health & Safety Corporate Healt 2010 - 2011		
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Key Decision?				No
Included within the Forwar	d Plan? (If y	es include refe	erence	No
number) Equality & Sustainability In	npact Assess	sment Undertal	ken	Yes/No (If No state why below)
Officer/Councillor Approva	I			
Officer Approval	Date	Name		
Chief Executive/Deputy Chief Executive				
Head of Service				
CMT	23/08/11 02/09/11	Chris Elliott & Andrew Jones Bill Hunt (all no comment)		
Section 151 Officer				
Monitoring Officer				
Finance				
Doutfalia Haldou(a)				
Portfolio Holder(s)				
Consultation & Community	Engagemen	t		

Employment Committee 27<sup>th</sup> September Agenda Item No.

Final Decision? Yes/No
Suggested next steps (if not final decision please set out below)

#### 1. **SUMMARY**

- 1.1 The Management of Health & Safety at Work Regulations requires employers to periodically review its H & S management systems and to consult with employees and representatives on such matters. Therefore to ensure the effectiveness of the Health & Safety policy, to keep it 'live' and to comply with H & S Law, a review has been undertaken and this report details reviewed and amended content of the Corporate Health & Safety Policy issue 2.
- 1.2 An annual report on corporate health & safety was prepared. This is the third such report which gives a brief summary of the work activity in relation to corporate health & safety.

#### 2. **RECOMMENDATION**

- 2.1 Health & Safety Policy - That the amendments to the Health & Safety Policy be agreed. See Appendices 1 & 2
- 2.2 Corporate Health & Safety Annual Report - That there is agreement to release the annual report on corporate Health & Safety for general circulation and publication on the website. See Appendix 3

#### REASONS FOR THE RECOMMENDATION 3.

3.1 To ensure that an effective and update health & safety management system is maintained and to ensure that the requirements of the Management of Health & Safety at Work Regulations are complied with.

#### 4. **ALTERNATIVE OPTION CONSIDERED**

- 4.1 That the above recommendations regarding the Health & Safety Policy are not implemented. However, this would not demonstrate good health & safety practice and could lead the organization to litigation and considerable amounts of public criticism.
- 4.2 It is not essential to publicise the annual report but by doing so it does demonstrate good health and safety management practice.

#### 5. **BUDGETARY FRAMEWORK**

Remedial works to be undertaken within existing resources. 5.1

#### 6. **POLICY FRAMEWORK**

6.1 Not Applicable.

#### 7. **BACKGROUND**

7.1 Health & Safety Policy – sections of the policy, mainly under Corporate Procedures and Codes Practice have been reviewed and amended as a result of audits that have taken place, changes in legislation, changes local emergency services arrangements and incidents that have taken place. This approach follows the principles of the Health & Safety Executive guidance HSG65

- 'Successful Health & Safety Management' refer to Appendices 1 & 2 for summary of amendments and additions to the policy.
- 7.2 <u>Corporate Health & Safety Annual Report</u> The report is set out to demonstrate the Council's performance in relation to the Management of Health & Safety at Work Regulations and the work that has been undertaken corporately to help achieve this.
- 7.3 To help maintain this standard, more emphasis has been placed on auditing of existing health & safety systems and procedures that have been implemented. Auditing of key risks during the period referred to in this report has proved worthwhile and identified some important issues that resulted in significant improvement, e.g. increased asbestos awareness among premises managers / supervisors, reviewed Tunstall Lone Worker emergency response procedure and contractor supervision.
- 7.3 The need for further awareness training was identified including Health & Safety Awareness for Service Area Managers. At the time of producing this report, it was learnt from the course feedback that the delegates found the training worthwhile and due to the increased awareness amongst the managers raised some interesting questions and general debate on the subject. This has been an important step forward and can only serve to enhance management of health and safety within Warwick District Council and enable each service area to have a better understanding of risk and how to manage the risks associated with their activities accordingly.

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## **Amendments to Health & Safety Policy**

H&S Policy, section 4.3 – In the Event of Fire (page 23 of procedure)

Added text -

Fire Alarms in a number of Council buildings contact the Fire Service
automatically. However, if safe to do so a follow up telephone call must also be
made to the Fire Service to inform them of the emergency and if possible
whether an actual fire has been discovered.

Section 4.7 – Asbestos (sub section 7)

Added text -

 All building managers, site supervisors or an appropriate substitute will receive appropriate asbestos awareness training and will be responsible for visually monitoring the condition of asbestos containing materials (ACM) within the premises that they manage or supervise. If they should discover a change to the condition or damage to ACM's they must report this to Housing & Property Services immediately.

Building managers and site supervisors will also be responsible for ensuring that they hold a hard copy of an up to date site asbestos survey register for their individual building. They also need to ensure that contractors are made aware of locations of ACM's within the building <u>before</u> any work, which could potentially result in disturbing these materials is carried out.

Section 5.7 - previously named Quarterly Health & Safety Inspection Procedure

• Renamed to 'Biannual Health & Safety Inspection Procedure', with minor text amendments made accordingly.

Section 6.5 - Office Based staff on Outside Duties (paragraphs 7 & 8)

- 7. When entry cannot be gained by persuasion, do not enter the premises unless invited. In the event of difficulty do not pursue the matter or enter into an argument, leave the premises. Nevertheless the meeting must be conducted throughout in a polite and businesslike manner.
  - (Added text)  $\rightarrow$  Where Council officers have requested Police to attend for the purposes of staff safety, they <u>must not</u> enter the premises without the Police Officers. If the person being visited refuses entry to the Police Officer(s), the Council Officers are to arrange for the meeting to be carried out in a safer environment at a later date if required.
- 8. When executing Court Warrants, a WDC Officer must be accompanied by at least another officer. (Added text)  $\rightarrow$  *Police Constable Presence is also required in such situations.*

Appendix 1 – Report of Employee / Member of the Public Accident / Violent Incident form

 Improvements made to the form to make it easier to fill out and to include mainly information on the first aid treatment given and name of first aider administering the treatment

Safe Procedures for dealing with discarded syringes –new Code of Practice to be added, refer to Appendix 2.

## Section 4.9 Gas

 The references to CORGI registered engineers has been amended to Gas Safe Registered engineers, as Gas Safe has since replaced CORGI as the official register of engineers who are qualified to work safely and legally on gas appliances.

## WARWICK DISTRICT COUNCIL

## Safe Procedures for dealing with discarded Syringes

## 1 Introduction

1.1 The hazards presented by hypodermic needles and syringes are no longer just a consideration for people in the medical profession. Unfortunately, they may be left lying around or hidden in unexpected locations, e.g. down the backs of chairs, behind cupboards or in WCs, etc.

## 2 Hazards

2.1 Contact with used syringes or needles may result in ill-health due to infection or illness. Puncture wounds from 'sharps' (i.e. needles and bladed devices such as scalpels, razors etc.) may cause wounds and bleeding which can make the employee susceptible to infections and viruses in the workplace.

## 3 Policy

- 3.1 To comply with Health and Safety legislation (1974) and thereby minimise the risk of injury to staff, students and visitors Warwick District Council (WDC) will:
  - Operate clear handling procedures for the disposal of drug related waste.
  - Provide appropriate PPE (Personal Protective Equipment)
  - Provide appropriate tools and equipment to assist in the safe disposal of discarded needles and syringes.
  - Ensure that information, instructions and training are provided for appropriate staff in relation to the safe disposal of sharps or drug related waste.
- 3.2 It is possible when undertaking your duties for WDC that you may come across discarded sharps. Service Area Managers must therefore take the necessary steps to prevent exposure. In such circumstances, it is important for you to follow the advice detailed in these procedures to ensure the personal safety of both yourself and others.

## 4 **Procedures**

- 4.1 <u>What action should you take if you find a discarded needle or one is reported to me?</u>
- 4.2 If you should find a discarded syringe whilst on Council business during normal working hours, its location must be reported immediately to Warwick District Council's Contract Services by telephoning **01926 412464**. They will be able to arrange for a contractor to dispose of it safely or offer further advice and assistance if required.
- 4.3 Collection and Safe disposal

- 4.4 As in para 4.2, Warwick District Council's Contract Services should be contacted in the first instance to arrange for safe disposal of discarded syringes that are found. However, for WDC premises that have local arrangements in place for the collection and disposal of syringes by trained staff, the following safe method should be used:
  - Always wear suitable gloves even when using tools to move needles. Gloves should not be relied on to give total protection, but they can help resist punctures in case of accidental contact.
  - Sweep up needles with a dust pan and brush; or
  - Use a pincer tool designed for handling sharps.
  - Do not try to re-sheath needles.
  - Place needles in a sharps box take the sharps box to the needle, not the needle to the sharp box (where possible). Try to put the sharps box on an even surface before opening it to deposit the needle.
  - Do not overfill the sharps boxes or try to push the contents down. Before disposal, seal boxes and dispose of through a registered disposal company or contact Contract Services.
  - Inform your line manager of any needles found as soon as possible.
- 4.5 What is the correct method of storing needles and syringes?
- 4.6 Used syringes and needles must be stored in an approved sharps box. Suitable sharps containers are manufactured to conform to British Standards 7320 from a puncture proof material and have the appropriate hazard warning labels attached. They also have a sealed lid to prevent sharps from being removed. Keep the sharps box in an area which is only accessible to staff.
- 4.7 Action following a puncture wound from a needle
  - Encourage the wound to bleed, do not suck the wound rinse thoroughly with running water. If water is not available, cleansing wipes provided in first aid kits should be used. Cover the wound with a dry plaster / dressing.
  - Formally record the incident using the Council's Accident Report Form, including details of the action taken.
  - Seek medical advice and treatment immediately contact the nearest Accident and Emergency department.

#### Useful Reference Material:

HSE – Handling needles in the waste and recycling industry Defra – Tackling drug related litter

**Useful Contact**: Leamington CDT, Court Street, Leamington Spa CV31 2BB (site of local needle exchange), Tel: 01926 885000

## **APPENDIX 3**

# **Warwick District Council**

# **Corporate Health & Safety**



Annual Report 2010 -2011

## **CONTENTS**

Introduction by Richard Hall, Head of Environmental Services		Page 3
1.	Management System	Page 4
2.	Policy	Page 4
3.	Organising	Page 4
4.	Planning & Implementing	Page 6
5.	Monitor & Measure Performance	Page 8
6.	Audit & Review	Page 9
7.	Summary	Page 12

## **INTRODUCTION**

Over the last four years we have been working to strengthen the Council's position in relation to the organisation's health & safety management. This has been a process of gradually tightening up on our policies and procedures and ensuring that these remain relevant and up to date.

We now have improved systems for carrying out risk assessments and making sure that they are regularly reviewed; for tracking of lone workers; work station assessments and for many other aspects of a good health & safety management system. There are many things which we still need to do, but we are making progress and it has to be a process of continuous improvement.

To have a really effective health & safety system everybody involved in the organisation needs to play their part and to take responsibility. We can help achieve this by keeping everyone informed. Training is essential in this and many people have taken part in a wide variety of training programmes in the last year. This annual report is also part of the way in which we can keep people informed.

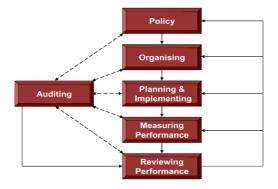
We did not conduct a staff survey last year because we felt that repeating it every year might not give us useful data, but you'll have your chance later on this year to express your views on how you see health & safety management within Warwick District Council.

Thank you for your contribution to helping the council to improve its health & safety systems. The emphasis has always been on a sensible, risk-based approach but we need to remind ourselves that it is only when things go wrong that systems really get tested. Building health & safety into our normal way of working, rather than regarding it as an 'add on' will help to ensure that we get it right and keep it that way.

Richard Hall Alan Richardson

Head of Environmental Services Health & Safety Advisor

#### 1.0 MANAGEMENT SYSTEM



1.1 In essence, the Council's Health & Safety management system continues to follow the Health & Safety Executives document HSG65 – 'Successful health and safety management'. The guidance is aimed at directors, managers with health & safety responsibilities, as well as health and safety professionals and employee representatives. It describes the principles and management practices which provide the basis of effective health and safety management

## 2.0 POLICY

## 2.1 <u>Health & Safety Policy</u>

- 2.2 The current document, Health & Safety Policy issue 2 has been effective since January 2009. The policy remains a live document and continues to be subject to review on an ogoing basis as a result of audit findings, incidents, changes in proces and legislation. Sections that have incorporated recent amendments inlcude: Out of Visits and Lone Working, Asbestos, Fire Safety, H&S Inspections and Accident Report form.
- 2.3 A new Code of Practice called 'Safe Procedures for dealing with discarded syringes' is to be added. This together with the amendments above have been reported to the Senior Management Team and are due to be submitted to the Employment Committee in September 2011.

## 3.0 ORGANISING

## 3.1 Training



- 3.2 Individual Service Areas are responsible for specialised safety training and will hold further records of training that they have arranged. Figures below show the number of employees that have received in-house H&S training from April 2010 through to April 2011. Some of the training needs such as Asbestos Awareness was identified as a result of internal auditing by the Health & Safety Adviser
- 3.3 It should be noted that H&S Induction training also incorporates the subjects listed below and that the other subjects listed are training sessions provided in addition to induction.

•	Health & Safety Induction	35
•	Health & Safety Awareness	14
•	Slips & Trips	36
•	Manual Handling	8
•	Fire Awareness / Warden	35
•	Tunstall Lone Worker	16
•	Assessnet - Risk Assessment	7
•	Online DSE Assessment / Training	107

Other H&S related training provided by external consultant 2010-2011

•	Display Screen Equipment Assessor	9
•	Asbestos Awareness	11
•	Employee Support Officer	10
•	Managing Conflict	55
•	First Aid	5

Total number of people trained: 348

- 3.4 Health & Safety Awareness training for Service Area Managers was at the time of this report being produced arranged by the H&S Adviser. The training being a 2 day bespoke course provided by Warwickshire College taking place on 27<sup>th</sup> June and 4<sup>th</sup> July 2011.
- 3.5 Health & Safety Referrals



- 3.6 From the start of April 2010 until April 2011 approximately 210 Requests for Service were allocated to the Health & Safety Adviser. The year 2009 2010 confirmed approximately 220 were received, these included requests for:
  - Risk Assessment advice / assistance
  - SMT H&S Update reports
  - Advice on / assistance with Safe Systems of Work
  - Workstation Assessments
  - Staff Alert List referrals and amendments
  - H&S Inspection assistance
  - First Aid enquiries
  - Accidents
  - Training requests
  - Meeting requests
  - Advice on H&S Legislation
  - Enquiries on general working environment
  - Environmental Protection duties
- 5.2 As shown in para 4.1 the number of service requests received by the Health & Safety Adviser in the 2010 2011 period remained roughly consistent with the previous period.

## 4.0 PLANNING & IMPLEMENTING

- 4.1 Managing the risk around water bodies
- 4.2 At the time of producing this report, the document "Managing the risk around water bodies" had been produced by staff within Cultural Services with input given by the Health & Safety Adviser to provide clear guidance to officers carrying out risk assessments around open water, thereby helping to ensure consistency in the approach taken across multiple sites.
- 4.3 It was concluded that risk management of this nature is generally an operational decision that is dealt with by officers as part of the day to day management of parks and open spaces. This document is scheduled to be brought before members in July 2011 because the issue had been highlighted by a fatality on a stretch of the River Avon in late 2010. As a result of the inquest into this unfortunate death the Coroner wrote to the Council requesting clarification of the Council's approach.

## 4.4 Assessnet

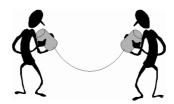
- 4.5 The AssessNet online safety management system continues to grow (as per para 1.7) and is being used by managers and those designated to perform risk assessments to record them in an online database, giving clarity as to what actions have been generated, responsibilities for these actions with timescales for completion and tracking of review dates.
- 4.6 At the time of producing this report, approximately 200 risk assessments had been completed on various subjects including Lone Working, Slips, Trips and Falls, Use of Gardening Equipment, Dealing with Sharps and many more.
- 4.7 To enable the Senior Management Team to monitor and manage the review of risk assessments and tasks generated, the Health & Safety Adviser continues to

- arrange for a list of risk assessments and their status to be sent to SMT on a quarterly basis.
- 4.8 Other modules of Assessnet as well as 'Risk Assessment' referred to above and 'DSE' below are gradually being utilised, such as Manual Handling and COSHH (Control of Substances Hazardous to Health).
- 4.9 The Health & Safety Adviser is currently arranging for a number Material Safety Data Sheets (safety information supplied with chemicals) held by Environmental Services to be added to the Assessnet database, so that the departments use of these chemicals can be risk assessed. This is intended to be a trial to ascertain the practicability of using this module on a wider scale.

## 4.10 Assessnet DSE (Display Screen Equipment) Module

- 4.11 At the time of producing this report, approximately 152 employees had completed online training in the use of display screen equipment and had undergone self assessments of their workstations.
- 4.12 The review of DSE Assessments remains an ongoing program with the help and co-operation of the trained DSE Assessors.

## 4.13 Communication



- 4.14 The intranets homepage still provides a useful tool to display important health & safety information to a wide audience throughout the Council . The types of information displayed in the year 2010 2011 included health & safety alerts, fire safety messages, requests for additional first aiders and advertisements for future training sessions.
- 4.15 The intranets Health & Safety page continues to provide a wide range of inhouse safety information and links to useful external websites and guidance. Plans are in place to review its content in the second half of 2011.

## 4.16 H&S Inspections

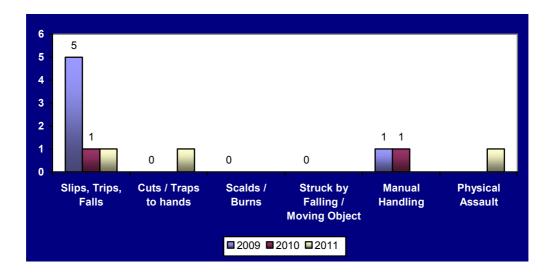
4.17 An increasing emphasis is being placed on workplace inspections, performed jointly by the Health & Safety Adviser and a service area Safety Representative. The purpose of the inspections being to identify any safety issues that require remedial action but also to provide a valuable opportunity to pass on information and advice source to the safety rep. At the time of the inspection, attempts are made to answer in queries and to provide advice on risk assessment and perhaps to address other safety issues present.

## 5.0 MEASURE & MONITOR PERFORMANCE

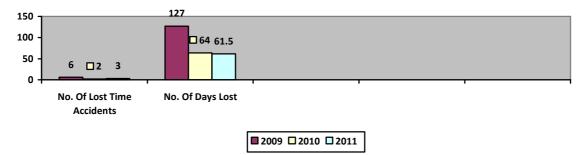
## 5.1 Lost Working Time Accidents



5.2 The graphs below summarise the number of employee lost working time accidents that have occurred between April 2010 and April 2011. This format will hopefully be useful to all and will allow comparative data to be tracked annually:



- 5.3 Total number of lost working time accidents for 2010 2011 was 3. Of these, two were reportable to the HSE as required by the RIDDOR Regulations (Reporting of Incidents, Diseases & Dangerous Occurrences Regulations 1995)
- 5.4 The RIDDOR accidents above resulted in a total of 61.5 lost working days. 56.5 of these days were as a result of a physical assault by a member of the public on a Council officer who was conducting a visit to the person's address. 4 days were lost as a result of an unforeseen incident involving an employee sustaining a minor eye injury whilst on an outside visit. A slip, trip & fall incident resulted in an employee requiring 1 day off work due to their injuries.
- 5.5 The year 2008-2009 showed that there had been 6 lost working time accidents resulting in 127 lost working days. The number of lost time accidents between 2009-2010 reduced by 66% resulting in the number of lost working days being reduced by 50%. As shown, the number of lost working time days incurred between 2010 and 2011 is 61.5, with 64 being the figure for the last period (see graph below) –



5.6 The above figures show a marked reduction the last 2 years in the number of lost working days incurred due to employee accidents. The reduction in the number slips, trips and falls accidents requiring employee absence also stands out.

## 6.0 AUDIT & REVIEW

## 6.1 *Audits*



- 6.2 Throughout the year, a number subjects and activities were identified as potential high risk areas and a list was drawn up for audit to examine the effectiveness of their corresponding procedures and codes of practice. Reports for completed audits below have been issued to the relevant Service Area Manager and employees involved. Paragraphs 1.17-1.34 below give details of audits performed and their recommendations.
- 6.3 Management of Asbestos within WDC Corporate premises July 2010
- 6.4 The audit was undertaken to assess the adequacy of key controls in place to meet the Council's statutory obligations on the control of asbestos as an employer and provider of services and facilities to customers and members of the public.
- 6.5 It was understood from members of Housing & Property Services that a review of their internal Control of Asbestos procedures was currently underway and taking on board the findings of this audit. The Councils Health & Safety Advisor noted that the corporate asbestos policy needed review and amendment to take into account outcomes of this audit. H&PS are the contracting department responsible for maintaining the asbestos database, arranging asbestos surveys and ensuring building, construction and M&E projects are delivered in accordance with applicable health and safety and asbestos legislation.
- 6.6 The main areas for improvement identified by the audit included:
  - The need to increase awareness of asbestos amongst building managers / supervisors through training.
  - Hard copies of current asbestos survey registers to be held at each corporate premises.
  - Amendments required to corporate policy

- Where asbestos surveys identify ACM's materials that require action, an action plan to be made for these actions to be dealt with appropriately.
- Specific action plan to be developed taking into account survey results for the ongoing monitoring of low hazard ACM's condition.
- 6.7 <u>Tunstall Lone Worker Monitoring System February 2011</u>
- 6.8 As a result of a sample audit in 2009, (documented in The Annual Report of 2009 for Corporate Health & Safety) 35% of employees who had access to the Tunstall Lone Worker system used it regularly as part of day to day lone working routine. As shown in para 4.2 the numbers of regular users has increased significantly to 52% with another 17% using it occasionally when required. Having accessed the Tunstall Lone Worker database at Acorn Court, it shows that the system, in the majority is being used by those who perhaps carry out the higher risk lone worker visits, e.g. Housing Officers, WR Officers and Benefits Visiting Officers.
- 6.9 The increase in usage shows an increased 'buy in' by Council employees and is a considerable improvement, given the lack of lone worker protection systems at WDC before its implementation. Tunstall, coupled with the Staff Alert List being available for employees to check before visiting, has resulted employees having increased ownership over their own health & safety is such situations and making for a more robust safe system of work.
- 6.10 The report did however highlight a number of improvements that could be made to further enhance the effectiveness of the Tunstall Lone Worker system. Many of these improvements however, are also reliant on employee cooperation to ensure the system is used correctly to maintain its effectiveness.
- 6.11 <u>Audit of Neighbourhood Services Management of Integrated Waste Services contract (Health & Safety) October 2010</u>
- 6.12 The information observed during the audit, showed that in general that health and safety information held for the Sita Integrated Waste Services contract is comprehensive and shows that many of the required safety measures are in place. Many of the issues raised are a matter of detail and recommendations made should result in improvements to systems already in place.
- 6.13 As noted in the report, clear and documented responsibilities for personnel from both WDC and Sita should be in place for issues of health & safety relating to the contract activities. Having said this, it was observed that a proactive approach has been taken by the Waste Policy & Performance Officer (WPPO) together with other Neighbourhood Services staff to help ensure that Sita are taking the necessary safety precautions despite the fact that these duties are not necessarily documented as their official duties.
- 6.14 Both the WPPO and H&S Adviser agreed that monitoring of Sita's activities could be considerably improved by Neighbourhood Services having a structured monitoring program out on site. This could also be further improved by Neighbourhood Services being included in Sita's defects reporting system, to report significant health & safety issues that could possibly have wider implications for the contract.
- 6.15 <u>Neighbourhood Services Management of Glendale's Grounds Maintenance</u> <u>Contract (Health & Safety) – November 2010</u>

- 6.16 The audit was a snapshot of the information held in relation to the Glendale Grounds Maintenance contract. It showed that Glendale have a Health & Safety Policy with responsibilities of key individuals documented and one which detailed the arrangements in place to control the health and safety risks.
- 6.17 As shown in the report, further improvements can be made to demonstrate good supervision of Glendale's contract works by having a structured monitoring regime in place. Both the WPPO and the CM agreed that monitoring of Glendale's activities could be considerably improved by Neighbourhood Services having a structured monitoring program out on site. For WDC to satisfy itself that the appropriate risk assessments have been performed would also demonstrate good practice in the management of contractor services.
- 6.18 Although the audit raised a number of issues, for which the H&S Adviser included recommendations for improvement, in general it also highlighted the fact that WDC staff involved have a good working relationship with Glendale. It was also noted that fortnightly client / contractor joint meetings are held to discuss issues, including those of a health & safety nature. These can only serve to be helpful in WDC / Glendale striving to work as safely as possible.
- 6.19 Although not included as an agenda item for the fortnightly Grounds
  Maintenance contract meeting mentioned above, both the WPPO and CM
  commented that it would also be beneficial for a tree safety issues to be
  discussed at a separate client / contractor meeting to cover any relevant issues
  to do with tree safety.
- 6.20 Other risk areas identified that will be audited later in the 2011 2012 period include:
  - Slips, Trips and Falls
  - Management of Workplace Stress
  - COSHH (Control of Substances Hazardous to Health)
  - Accident Reporting

## 7.0 Summary

- 7.1 As mentioned at the start of this report, the Council's approach to health & safety management continues to follow the guidance document HSG65 'Successful health & safety management'.
- 7.2 To help maintain this standard, more emphasis has been placed on auditing of existing health & safety systems and procedures that have been implemented. Auditing of key risks during the period referred to in this report has proved worthwhile and identified some important issues that resulted in significant improvement, e.g. increased asbestos awareness among premises managers / supervisors, reviewed Tunstall Lone Worker emergency response procedure and contractor supervision.
- 7.3 The need for further awareness training was identified including Health & Safety Awareness for Service Area Managers. At the time of producing this report, it was learnt from the course feedback that the delegates found the training worthwhile and due to the increased awareness amongst the managers raised some interesting questions and general debate on the subject. This has been

an important step forward and can only serve to enhance management of health and safety within Warwick District Council and enable each service area to have a better understanding of risk and how to manage the risks associated with their activities accordingly.